

Long Term Care Facility: Response Checklist

November 2020

Terms Used

VDH - Vermont Department of Health

HOPR - VDH's Health Care Outbreak Prevention and Response Team

DAIL - Vermont Department of Disabilities Aging and Independent Living

DLP – DAIL's Division of Licensing and Protection

Transmission-based precautions – refers to <u>all recommended COVID-19 PPE</u>. Additionally, residents for whom transmission-based precautions are indicated should be restricted to their rooms to the extent possible.

Notes for using this checklist

This checklist includes many of the key interventions involved in a response to COVID-19 in a long-term care facility but is not entirely comprehensive, as additional details can be discussed with VDH/HOPR & DAIL/DLP following the notifications and consultations recommended herein.

First Priority (enact immediately)

| | Exclude positive staff from work. |
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| | Place positive residents on transmission-based precautions. If they have a roommate, do not move that person before consulting with VDH/HOPR. |
| | Notify VDH at 802-863-7240 and discuss next steps with HOPR. If you're calling after hours, an on-call duty officer can be reached by selecting option 7 in the phone menu. |
| | Notify DLP at 802-241-0344. They can answer questions related to notification of families. Make notification to families within 12 hours if required to do so by CMS/DLP. |
| | Exclude any symptomatic staff from work, even if they have not tested positive. |
| | Place any symptomatic residents on transmission-based precautions, even if they have not tested positive, and point of care test if available |
| Note | es: |
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| Sec | ond Priority (enact as soon as possible) |
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| | Halt non-essential and non-end-of-life/compassionate care visitation until a plan/timeline for their resumption is developed in consultation with the Department of Health |
| | Cease group activities and communal dining (to the extent safely possible) until a plan/timeline for their resumption is developed in consultation with the Department of Health |

| | Consider halting admissions, particularly to known affected units, until a plan/timeline for their | |
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| | resumption is developed in consultation with the Department of Health | |
| | If a staff member tested positive, place all residents on (at least) the units on which they've | |
| _ | recently worked on transmission-based precautions. | |
| | If a resident tested positive, place all residents on (at least) their unit on transmission-based | |
| | precautions. If positive residents are detected on multiple units, implement transmission-based | |
| _ | precautions facility-wide. | |
| | Cease any staff floating, even on separate days, between units until further consultation with | |
| | VDH/HOPR and DAIL/DLP. Staff who worked on affected units/floors, looking back to the start | |
| | of the potential infectious period, should remain there for the duration of the response. Discuss | |
| | staffing concerns with VDH/DAIL. | |
| | Increase monitoring of ill residents to at least 3 times daily to identify and quickly manage | |
| | serious infections. Consider increasing monitoring of asymptomatic residents from daily to | |
| | every shift to more rapidly detect any residents with new symptoms. | |
| | Compile a line list of all staff and residents and discuss with HOPR how to submit it securely. | |
| | This should indicate who has tested positive and who is symptomatic. Several other variables | |
| | relevant to facility-wide testing and contact tracing should be included and template line lists | |
| _ | are available from the Health Department. | |
| | Ensure that high-touch surfaces throughout the facility, and shared equipment, are frequently | |
| _ | cleaned and disinfected (e.g., each shift). | |
| | Work with VDH/HOPR & DAIL/DLP to develop a plan for facility-wide testing of staff and | |
| | residents as required by CMS or as recommended by the State of Vermont. | |
| Notes: | | |
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| Thir | d Priority (may be ongoing) | |
| | Monitor PPE burn rates, maintaining at least a 14-day supply through existing supply channels | |
| | to the extent possible. If your facility is unable to maintain a 14-day supply through existing | |
| | supply channels and drops below that supply threshold, promptly submit an order to the Stateiii. | |
| | Educate residents and families on COVID-19 fundamentals, including symptoms to watch for | |
| | and report, and prevention measures. | |
| | Educate staff on effective hand hygiene and PPE use, and monitor for compliance. | |
| | Continue to reach out to VDH for ongoing support and guidance. | |
| Notes: | | |
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i https://www.healthvermont.gov/sites/default/files/documents/pdf/SOV-Personal-Protective-Equipment-Guidance.pdf

ii https://www.healthvermont.gov/sites/default/files/documents/xlsx/COVID19-LineList_FacilityStructeredCare.xlsx

iihttps://forms.office.com/Pages/ResponsePage.aspx?id=0500IK26PE0cAnDtzHVZxnYHsES1qh9Hs2EGYmwc2tBURDV PSDJDS1hUTzdJMFlxVDZHQ1JHS1cxViQIQCN0PWcu